

SUBDIVISION MINOR ALTERATION APPLICATION

FORM MUST BE COMPLETED IN INK, PREFERABLY BLUE.

PENCIL WILL NOT BE ACCEPTED.



DATE STAMP FOR CITY USE ONLY	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;"><u>TO BE FILLED OUT BY APPLICANT</u></td> </tr> <tr> <td>PROJECT NAME (if any):</td> </tr> <tr> <td>ORIGINAL PROJECT NUMBER:</td> </tr> <tr> <td>TAX ASSESSOR'S NUMBER(S):</td> </tr> <tr> <td> </td> </tr> <tr> <td>PROJECT STREET ADDRESS OR ACCESS STREET:</td> </tr> <tr> <td style="text-align: center;"><u>FOR CITY USE ONLY</u></td> </tr> <tr> <td>FILE NUMBER:</td> </tr> <tr> <td>PROJECT NUMBER:</td> </tr> <tr> <td>DATE RECEIVED:</td> </tr> <tr> <td>APPLICATION FEE:</td> </tr> <tr> <td>TREASURER'S RECEIPT NUMBER:</td> </tr> </table>	<u>TO BE FILLED OUT BY APPLICANT</u>	PROJECT NAME (if any):	ORIGINAL PROJECT NUMBER:	TAX ASSESSOR'S NUMBER(S):	 	PROJECT STREET ADDRESS OR ACCESS STREET:	<u>FOR CITY USE ONLY</u>	FILE NUMBER:	PROJECT NUMBER:	DATE RECEIVED:	APPLICATION FEE:	TREASURER'S RECEIPT NUMBER:
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SUBMITTAL REQUIREMENTS													
APPLICATION	<i>One original (which must contain an original signature)</i> and <i>three copies</i> must be provided. Whenever possible, originals must be <i>signed in blue</i> . Please identify the original document.												
SUPPORTING DOCUMENTS	<i>One original (which must contain an original signature, where applicable)</i> , and <i>three copies</i> (if an original is not applicable, <i>four copies</i> must be provided).												
FULL-SIZE DRAWINGS	<i>Four copies</i> of the required drawings must be provided. Drawings <i>must be folded</i> and <i>must be no greater than 18" x 24"</i> in size.												
REDUCED DRAWINGS	<i>Two copies</i> of the proposed drawings reduced to 11" x 17" must be provided (if full-size drawings are larger than 11" x 17") (if applicable).												
SUBMITTING APPLICATIONS	Applications <i>must be submitted in person</i> by either the owner or the owner's designated agent. Should an agent submit the application, a <i>notarized Owner/Agent Agreement</i> must accompany the application. Please call (206) 780-7672 to set an appointment.												
FEES	Please call the Department of Planning & Community Development at (206) 780-3770 for submittal fee information.												
ATTACHED SUBMITTAL CHECKLIST	Please refer to attached Submittal Checklist for further information. Note: when submitting this application, please do not copy or include the Submittal Checklist sheets attached to the back of this application.												
APPLICATIONS WILL NOT BE ACCEPTED unless these basic requirements are met and the submittal packet is deemed counter complete.													

DEPARTMENT OF PLANNING AND COMMUNITY DEVELOPMENT
 280 MADISON AVENUE NORTH • BAINBRIDGE ISLAND, WA • 98110-1812
 PHONE: (206) 842-2552 • FAX: (206) 780-0955 • EMAIL: pcd@bainbridgewa.gov
www.ci.bainbridge-isl.wa.us

SUBDIVISION MINOR ALTERATION APPLICATION

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A. GENERAL INFORMATION

* PLEASE NOTE THAT THE APPLICATION MUST CONTAIN SIGNATURES OF ALL AFFECTED PROPERTY OWNERS OR AN OWNER/AGENT AGREEMENT REPRESENTING ALL AFFECTED PROPERTY OWNERS.

1. Name of property owner: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

Name of property owner: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

Name of property owner: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

If the owner(s) of record as shown by the county assessor's office is (are) not the agent, the owner's (owners') signed and notarized authorization(s) must accompany this application.

2. Applicant/agent: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

3. Name of land surveyor: _____

Address: _____

Phone: _____ Fax: _____

E-mail: _____

4. Planning department personnel familiar with site: _____

5. Description of proposed amendment: _____

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6. General location of site:

7. Please give the following existing parcel information:

Assessor's Parcel Number	Parcel Owner	*Lot Area
Use additional sheet if necessary		Total of all parcels:

** As defined in Bainbridge Island Municipal Code 18. 12.050*

8. Your proposal is best described as:

- ☐ commercial, industrial or multi-family subdivision; or
- ☐ single family subdivision: ☐ cluster or ☐ open space

9. Legal description (or attach):

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10. Current comprehensive plan, zoning and shoreline designations and use of subject parcel(s):

Lot Number	Comp Plan Designation	Zoning Designation	Shoreline Designation	Current Use
Lot				
Lot				
Lot				
Lot				

11. Does the site contain an environmentally sensitive area as defined in Critical

Areas Ordinance (*Bainbridge Island Municipal Code Chapter 16.20*)?☐ yes ☐ no ☐ unknown

If yes, check as appropriate:

<input type="checkbox"/> wetland*	<input type="checkbox"/> geologically hazardous area**	<input type="checkbox"/> stream*
<input type="checkbox"/> wetland buffer*	<input type="checkbox"/> zone of influence**	<input type="checkbox"/> stream buffer*
<input type="checkbox"/> slope buffer**	<input type="checkbox"/> fish and wildlife habitat area	<input type="checkbox"/> fish and wildlife habitat area

* If your site includes a wetland or wetland buffer, a wetland report may be required with your application.

** If your site includes a geologically hazardous area or is within the zone of influence as defined in *Bainbridge Island Municipal Code 16.20*, a geotechnical report may be required with your application.

12. Is construction planned within 200 feet of ordinary high water (usually where shoreline vegetation changes from salt tolerant to upland plants)?

☐ yes ☐ no ☐ unknown**B. TECHNICAL INFORMATION**

1. Do storm water systems exist on the site?

☐ yes ☐ no ☐ unknown

If yes, were they constructed after 1982?

☐ yes ☐ no ☐ unknown

If yes, what type of storm water system exists on the site?

☐ infiltration ☐ open ditching ☐ closed conveyance ☐ detention

2. Will the completed project result in excavating of or filling in:

☐ less than 50 cubic yards. ☐ more than 50 cubic yards but less than 100 cubic yards. ☐ more than 100 cubic yards.**C. Subdivision Information:**

1. Are any restrictive covenants on the subject property? (If yes, please attach.)

☐ yes ☐ no

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I hereby certify that I have read this application and know the same to be true and correct.

* PLEASE NOTE THAT THE APPLICATION MUST CONTAIN SIGNATURES OF ALL AFFECTED PROPERTY OWNERS OR AN OWNER/AGENT AGREEMENT REPRESENTING ALL AFFECTED PROPERTY OWNERS.

*Signature of owner(s) or authorized agent

Date

Please Print Name

*Signature of owner(s) or authorized agent

Date

Please Print Name

**If signatory is not the owner of record, the attached "Owner/Agent Agreement" must be signed and notarized.*

SUBMITTAL DOCUMENTS

A complete application shall include the items listed below (unless waived in writing by the director or project manager):

- ☐ A completed application form provided by the city containing the original signatures of all property owners affected by the proposal;
- ☐ A notarized Owner/Applicant agreement signed by all owners in the event the owners designate an agent to act in their stead;
- ☐ An original and three (3) copies of the application and all supporting documentation;
- ☐ Original and three copies of the existing site plan, if the alteration includes homesite location or other applicable dimensional standard. Drawings must be folded, must be a maximum of 18" x 24" in size with a minimum scale of 1" = 100'. No construction drawings or other sized drawings will be accepted unless specifically requested by the planner;
- ☐ Original and three copies of the existing open space plan, if alteration includes a change to the approved open space plan.

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- ☐ Original and three copies of the proposed site plan, if the alteration includes homesite location or other applicable dimensional standard. Drawings must be folded, must be a maximum of 18" x 24" in size with a minimum scale of 1" = 100'. No construction drawings or other sized drawings will be accepted unless specifically requested by the planner;
- ☐ Original and three copies of the proposed open space plan, if alteration includes a change to the approved open space plan.
- ☐ Original and three copies of a written analysis of how the change complies with decision criteria of the application used in the first instance;
- ☐ Two copies of each drawing, reduced to 11" x 17";
- ☐ An application fee in the amount of specified by the fee schedule, check made payable to the City of Bainbridge Island;
- ☐ An application fee in the amount specified by the Kitsap County Health District, check made payable to the Kitsap County Health District.

INFORMATION TO BE ON DRAWINGS

A. IDENTIFICATION INFORMATION (to be included on each page of each drawing):

- ☐ Name of proposed project;
- ☐ Name, address, phone and fax numbers and e-mail address of whomever prepared the drawing;
- ☐ Date of drawing preparation;
- ☐ North arrow;
- ☐ Graphic scale (minimum scale: 1" = 100');
- ☐ Quarter section, section, township and range of the proposed project; and
- ☐ Page numbers and total number of pages.

B. BASE MAP DRAWING CONTENT

Please provide the following information on one or more sheets:

- ☐ Name, address, phone and fax numbers and e-mail address of property owner and applicant;
- ☐ Assessor's account number(s) of parcel(s) included within the proposed project;
- ☐ Legal description of the property included within the proposed project;

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- ☐ Total area of the proposed project;
- ☐ Zoning and comprehensive plan designation(s) of parcels included within the proposed project;
- ☐ Proposed home site areas and/or lots;
- ☐ Contours at a maximum interval of five feet;
- ☐ Location of all existing structures, wells (including well protection areas) and other improvements located on the subject property;
- ☐ Location, name and width of all existing and proposed streets, roads, bicycle paths or lanes, trails, easements, greenways, and/or open spaces located on the subject property;
- ☐ Existing land use(s) on the subject property;
- ☐ All streams, wetlands, shorelines, drainage ways or critical areas and any associated buffer(s) located on or within 150 feet of the proposed project;
- ☐ If within 200 feet of the shoreline, ordinary high water mark;
- ☐ Type of vegetation (i.e.: wooded, meadow, cleared, wetland, etc.) on or within 150 feet of the subject property;
- ☐ Location of all slopes steeper than 15% showing top and toe and percentage of slope;
- ☐ FEMA Flood Insurance Rate Map designation of the property included within the proposed project;
- ☐ Location and area of proposed open space (if applicable);
- ☐ Open space areas designated as separate tracts or portions of lots (if applicable);
- ☐ Location of existing and proposed individual or community water supply and septic systems on the subject property or within 150 feet of the subject property;
- ☐ Proposed means of meeting the requirements of the city's storm drainage ordinance; and
- ☐ Proposed means of meeting the city's fire protection ordinance.

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Owner/Agent Agreement

The undersigned is (are) the owner(s) of record of the property identified by the Kitsap County Assessor's account number _____, located at _____, Bainbridge Island, Washington. The undersigned hereby gives (give) consent and approval to

_____ to act on his/her (their) behalf as his/her (their) agent to proceed with an application for (please check all items that apply):

- ☐ preapplication conference
- ☐ planning permits
- ☐ construction permits (i.e. building, water/sewer availability, right-of-way, etc)

on the property referenced herein. This agreement authorizes the agent to act on the owner's behalf for the above checked applications through (date or specific phase) _____

OWNER OF RECORD

DATE

OWNER OF RECORD

DATE

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STATE OF WASHINGTON)
) SS.
COUNTY OF KITSAP)

On this _____ day of _____, 20____, before me, the undersigned, a Notary Public in and for the State of Washington, duly commissioned and sworn, personally appeared:

_____ to me known as the individual(s) described in and who executed the foregoing instrument, and acknowledged to me that he/she/they signed and sealed the said instrument, as his/her/their free and voluntary act and deed for the uses and purposes therein mentioned, and on oath stated that he/she/they was (were) authorized to execute said instrument.

WITNESS MY HAND AND OFFICIAL SEAL, hereto affixed the day and year in this certificate above written.

Notary Public in and for the State of Washington

Residing at _____

My appointment expires: _____